

# COMMUNITY SERVICE ACTION PLAN

Volunteer's Name: \_\_\_\_\_

Title: \_\_\_\_\_

Issue Area/Project Name: \_\_\_\_\_

Type of Project: Direct \_\_\_\_\_ Indirect \_\_\_\_\_ Advocacy \_\_\_\_\_ Research \_\_\_\_\_

Description of Project: \_\_\_\_\_

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Our Goals Are: \_\_\_\_\_

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Task to Be Completed: \_\_\_\_\_

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Partners: \_\_\_\_\_

### Possible Dates

Resources Needed to Accomplish Project:

[illegible]

### Master Sheet to Track Tasks:

[illegible]